

Please type a plus sign (+) inside this box →

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing OR Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	1307
First Named Inventor	Tiedtke; H.
COMPLETE IF KNOWN	
Application Number	/
Filing Date	2/25/98
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Device with Therapeutic Catheter
"Vorrichtung mit einem therapeutischen Katheter"

the specification of which
 is attached hereto
OR
 was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			YES	NO
197 17 790.5	Germany	26 April 1997	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

(Page 1 of 23)

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

PTO/SB/01 (12-97)
Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Customer Number → Place Customer Number Bar Code Label here
 Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Robert C Beck	28,184	DAN Tysver	35,726

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: Customer Number or Bar Code Label OR Correspondence address below

Name	Robert C Beck esq		
Address	1011 First street South ; Suite 440		
Address			
City	Hopkins	State	MN
Country	USA	ZIP	55343
	Telephone	612 933 3412	Fax 612 933 3049

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])			Family Name or Surname		
HANS Jürgen			Tiedtke		
Inventor's Signature	<i>Hans Jürgen Tiedtke</i>				
Residence: City		State		Country	Citizenship
Post Office Address	Hehlrather Strasse 29				
Post Office Address	D-52249 Eschweiler,				
City		State		ZIP	Country
<input checked="" type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto					

Please type a plus sign (+) inside this box →

PTO/SB/02A (3-97)
Approved for use through 9/30/98. OMB 0651-0032

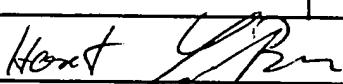
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.



DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Horst		Lubem				
Inventor's Signature						Date
Residence: City	State	Country				Citizenship
Post Office Address	Euskirchener Strasse 48					
Post Office Address	D-52351 Duven					
City	State	ZIP	Country	Germany		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature						Date
Residence: City	State	Country				Citizenship
Post Office Address						
Post Office Address						
City	State	ZIP	Country			
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature						Date
Residence: City	State	Country				Citizenship
Post Office Address						
Post Office Address						
City	State	ZIP	Country			

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

COMBINED DECLARATION/POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled DEVICE WITH THERAPEUTIC CATHETER the specification of which (check one):

- is attached hereto
 was filed on 02/25/98
as U.S. Application
Serial No. 09/030,499
 and was amended on (if
applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefit(s) under Title 35, United States Code §119 (a)-(d) of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

Prior Foreign Application(s)

Number	:	197 17 790.5
Country	:	Germany
Day/Month/Year Filed	:	April 26, 1997
Priority (yes/no)	:	Yes

Number	:
Country	:
Day/Month/Year Filed	:
Priority (yes/no)	:

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) as listed below:

Provisional Application No. :

Filing Date :

Provisional Application No. :

Filing Date :

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international applications designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information that is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 and that which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No. :

Filing Date :

Status (patented, pending, abandoned) :

Application Serial No. :

Filing Date :

Status (patented, pending, abandoned) :

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

David M. Crompton, Reg. No. 36,772;
Glenn M. Seager, Reg. No. 36,926;
Brian N. Tufte, Reg. No. 38,638;
Michael A. Kondzella, Reg. No. 18,013;
Craig F. Taylor, Reg. No. 40,199;
Robert E. Atkinson, Reg. No. 36,433;
Allen W. Groenke, Reg. No. 42,608;
Luke Dohmen, Reg. No. 36,783;
Peter J. Gafner, Reg. No. 36,517;
Robert M. Rauker, Reg. No. 40,782; and
Todd P. Messal, Reg. No. 42,883

Send correspondence to:

Glenn M. Seager
CROMPTON, SEAGER & TUFTE, LLC
331 Second Avenue South, Suite 895
Minneapolis, Minnesota 55401-2246
(612) 677-9050

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon, I further declare that I understand the content of this declaration.

* HJ7

Full name of sole or first inventor: Hans Jurgen Tiedtke *

Residence: ~~Eschweiler, Germany~~ Aachen, Germany Citizenship: Germany

Post Office Address: ~~Hehlrather Strasse 29, D-52249 Eschweiler,~~ Germany

~~Lochnerstr. 30 52064 Aachen*~~

* HJT

Inventor's Signature H - J Date 09. 02. 2000

Full name of second or joint inventor: Horst Lubem Lussem*

Residence: Duren, Germany Citizenship: Germany

Post Office Address: ~~Euskirchener Strasse 48, D-52351 Duren,~~ Germany

~~Dr.-Karl-Reus-Str. 16B, D-63834 Sulzbach a.K.~~

* HL

Inventor's Signature Horst Lussem Date 09. 02. 2000

* HL